

Appl. No. 10/748,887  
Amdt. Dated June 12, 2007  
Reply to Office Action of April 12, 2007

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This listing of claims will replace all prior versions, and listings, of claims in the application:

**LISTING OF CLAIMS:**

Claim 1 (currently amended): A method for lowering sex hormone levels in a human subject in need of treatment, comprising administering to the subject an effective amount of an LHRH-antagonist, wherein said LHRH-antagonist is peptidic ~~or non-peptidic~~, the lowered sex hormone levels in said subject result in modification of the T-cell population in said subject, and said LHRH-antagonist will lower sex hormone levels but not to the point of castration or below the castration level of said subject.

Claim 2 (previously amended): A method for lowering sex hormone levels in a human subject in need of treatment, comprising administering to the subject an effective amount of an LHRH-antagonist to said subject wherein the lowered sex hormone levels in said subject result in modification of the T-cell population in said subject.

Claim 3 (canceled).

Claim 4 (previously amended): A method for lowering sex hormone levels in a human subject in need of treatment, comprising administering to the subject an effective amount of an LHRH-antagonist to said subject wherein the lowered sex hormone levels in said subject result in a modification of the T-cell population in an individual suffering from a

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HIV infection, cancer, an auto-immune disease, endometriosis, asthma, arthritis, dermatitis, multiple sclerosis, Jacob Creutzfeldt-disease, or Alzheimer's disease.

Claim 5 (canceled).

Claim 6 (canceled).

Claim 7 (withdrawn): Examples for substances that can be used as LHRH-antagonists according to claims 1-6 are cetrorelix, teverelix, antide, or abarelix.

Claim 8 (withdrawn): Use of a LHRH-antagonist for producing a medicament for the treatment of diseases according to claims 1 to 7.

Claim 9 (withdrawn): Use according to claim 8, characterized in that the LHRH-antagonist is administered in the following total dose from 5 mg to 120 mg divided in a period of 1 to 8 weeks and according to needs with repeat of the therapy every 3 to 4 months.

Claim 10 (withdrawn): Use according to claims 8 and 9, characterized in that cetrorelix pamoate is administered in the following total dose from 30 mg to 120 mg divided in a period of 1 to 4 weeks and according to needs with repeat of the therapy every 3 to 4 months.

Claim 11 (withdrawn): Use according to claims 8 and 9, characterized in that cetrorelix acetate is administered in the following total dose from 5 mg to 80 mg divided in a period of 1 to 8 weeks and according to needs with repeat of the therapy every 3 to 4 months.

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Claim 12 (Currently amended): The method according to any one of claims 1-6, wherein said LHRH-antagonist is chosen from CETRORELIX, TEVERELIX, ~~ANTIDE~~, ITURELIX or ABARELIX.

Claim 13 (previously amended): The method according to any one of claims 1-6, wherein said LHRH-antagonists is CETRORELIX or a pharmaceutically acceptable salt form thereof.

Claim 14 (currently amended): The method according to any one of claims 1-6, wherein said effective amount of an LHRH-antagonist is administered at a dose of about 5 mg to 120 mg for a period ranging from 1 to 8 weeks and optionally repeating said method of lowering sex hormone levels every 3 to 4 months while there is still a need of treatment by said subject hormones.

Claim 15 (currently amended): The method according to any one of claims 1-6, wherein the LHRH-antagonist CETRORELIX PAMOATE is administered at a dose of about 30 mg to 120 mg for a period ranging from 1 to 4 weeks and optionally repeating said method of lowering sex hormone levels every 3 to 4 months while there is still a need of treatment by said subject hormones.

Claim 16 (currently amended): The method according to any one of claims 1-6, wherein the LHRH-antagonist CETRORELIX ACETATE is administered in a dose of about 5 mg to 80 mg for a period ranging from 1 to 8 weeks and optionally repeating said method of

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lowering sex hormone levels every 3 to 4 months while there is still a need of treatment  
by said subject hormones.